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COMMENTARIES

Tensions in postgraduate training: Meaningful engagement or 'tick-box' supervision?

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Engagement with workplace-based assessment (WBA) is the plea of the stakeholder: striving for meaningful educational dialogues and early detection of difficulty, and moving away from a tick-box 'gaming' approach to these assessments. However, ask postgraduate trainees about their last WBA encounter and it may come as no surprise that they believed their assessor failed to allocate adequate time to observe them or to provide quality feedback, and that they lacked sufficient awareness of the WBA requirements. Conversely, that same assessor may well express frustrations about trainees' last-minute endeavours to cram in the assessment before the deadline and their subsequent failure to display sufficient insight and engagement with the feedback given.

This caricature is somewhat provocative. However, in their hermeneutic review of the literature on workplace-based assessment, Prentice et al. consider the misuse of WBA and explore disengagement and the underpinning tensions in postgraduate education.¹ The summative use of WBA was considered to cause a shift of focus for trainees towards performance, undermining the educational aspects of the assessment and 'gaming' their approach.

In this commentary, we consider tensions highlighted by Prentice et al. that are also evident in postgraduate supervision, and suggest how trainees and their supervisors might incorporate meaningful dialogue and interaction within the training relationship.¹

The authors suggest that these threats to engagement relate to a complex interplay between the design of assessment tools themselves, users of the tools (trainees and their assessors) and the clinical and educational systems (or context) in which these programmes of workplace-based assessment are embedded. Meaningful educational alliances, akin to the therapist-counsellor alliance in psychology, have been connected to learners' engagement with feedback,

and offer an important avenue for exploration when considering disengagement and misuse of WBA.^{2,3} However, training relationships themselves also risk perfunctory, superficial and box-ticking approaches. Trainees and supervisors alike may view educational supervision as an administrative burden, rather than a desired and valuable process.⁴⁻⁶

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Bordin's 'working alliance'-based model of supervision, developed from the 'therapeutic alliance' model in psychology and counselling, offers a useful conceptualisation of a high-quality supervisory relationship.⁷ The model proposes three components: (a) mutual agreement (between supervisor and trainee) on the goals of supervision; (b) agreement on the tasks required to reach those goals; and (c) a strong emotional bond between them.^{3,7-9} Agreement of goals and tasks, central to the working alliance, has been cited as mediating the supervisor's dualistic roles of trainee development and assessment.¹⁰ However, meaningful engagement by trainees and their supervisors in the educational alliance is not without its challenges.

Tensions are ubiquitous in health care education, and not simply confined to the supervisor's roles.¹¹ There is a tendency within the medical profession to create narrow sets of uniform goals and expectations for how trainees are or 'ought' to be.¹² However,

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trainees have a number of responsibilities, both professionally and in their home and family life, which lead to diverse interpretations of what their training should look like and how the supervisory relationship can support it.¹³ 'Agreement' on the goals and tasks of supervision requires interactions where the trainee's and supervisor's expectations are shared, navigated and negotiated. Guidance to facilitate supervisory discussions within postgraduate training is frequently framed to explore trainees' learning needs, reflect on their performance and develop action plans for development.¹⁴⁻¹⁶ However, probing beneath the surface to consider the factors and expectations that influence observed behaviours or values is generally not articulated within training guidance. We would suggest that dialogues between trainees and their supervisors need to move beyond the current frameworks used for educational supervision meetings. In the same way that WBA tools must be fit for purpose, the tools used for supervision planning meetings should facilitate dialogues that push for clarity from the trainee and supervisor on their expectations and goals for supervision, acknowledging the complexity of their roles and responsibilities (inside and outside training).

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An additional consideration relates to Bordin's concept of 'bond'. This has been linked to knowing and liking one another, and overlaps with notions of trust and safety within the supervisory relationship.⁷ Trainees need to be able to count on (or trust) their supervisor to provide the support they require.¹⁶ However, when this is in doubt, distrust and suspicion arise.² As outlined by Prentice et al., facilitating longitudinal relationships can be part of the answer, but these also require knowing trainees as individuals and inviting their voice to shape their training.¹

It has been argued that it is the trainee's, rather than the supervisor's, appraisal of the quality of the alliance that is particularly important. Trainees' multifaceted judgement of supervisors' commitment to the alliance, their credibility as a clinician and role model and their inclusion of the trainees' perspective may influence their engagement with supervision.^{3,9} Of course, the provision of support from supervisors can be perceived to be in tension with their assessment and monitoring roles: if trainees don't trust them, they won't be open about their vulnerabilities and difficulties.

In the UK, the processes of educational supervision were formalised in the early 2000s to facilitate high-quality support of postgraduate trainees.¹⁸ This includes regulation of clinical supervisors, who must provide evidence of ongoing quality supervision and relevant continuing professional development.⁴ However, quality supervision is in tension with high clinical workloads and insufficient time. There is a risk that the precious time available for supervisory relationships is used to demonstrate evidence of supervision (or tick the boxes) rather than to strive for meaningful and quality educational alliances. Consequently, medical education becomes less personal.¹⁹ This tension requires acknowledgement by educators and exploration by researchers to facilitate cultures where quality supervisory relationships are valued and facilitated.

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As highlighted by Prentice et al., the tensions inherent in the use of WBAs must be acknowledged and resolved. Similarly, the tensions pervasive in a complex educational landscape must be articulated and understood by trainees and their supervisors, or the usefulness and purpose of the supervisory relationship may be devalued.^{1,18} The pursuit of clarity, safety and agreement in supervision may go some way to facilitate meaningful engagement.²⁰

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Medical trainees as job crafters: Looking at identity formation through another lens

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As medical trainees progress through their education, they experience multiple transitions to new roles with increasing autonomy and decreasing supervision. These transitions contribute to trainees' formation of identities as physicians.^{1,2} Two articles in this issue of *Medical Education* provide rich accounts of trainees' transitions at different stages of medical education. The article by Brown et al addresses the transition to graduate medical education,³ and the article by Gordon et al focuses on the transition from graduate medical education to independent practice.⁴ While reading these articles, we

noticed two intertwined processes that appear to be shared in these transitions: (a) supervisors grant trainees greater autonomy as they gain experience and, by doing so, tacitly offer them a new identity; and (b) trainees exercise agency in response—accepting the new identity, retaining a previous identity or remaining in liminal stages between identities. These descriptions of trainees' agency reminded us of 'job crafting', a theoretical approach described in the organisational psychology literature. Job crafting helps examine how individuals make sense of their experiences of work and define the meaning